PENISTONE
RURAL DISTRICT COUNCIL

ANNUAL REPORT
of the
Medical Officer of Health
for the Year
1968

PENISTONE RURAL DISTRICT COUNCIL

PUBLIC HEALTH COMMITTEE, 1968.

Councillor H.B. Garfield (Chairman of Public Health Committee)
(Vice-Chairman of the Council)

" F.B.Lamb (Vice-Chairman of Public Health Committee)

" E. Hoyland, J.P. (Chairman of the Council)

" L. Beever, J.P.

" W.G.A. Carrington.

" W. Carter.

" V. Hough.

" Mrs. K.F.Jackson.

" D. Jubb.

" W. Kent.

" G.E.Mann.

" J.A.Moxon.

" D.W.Myers.

" W.E.Spencer.

" Mrs. M. Thawley.

" E.E.Thorpe.

" J. Wade.

STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health:

F.C. ARMSTRONG, M.B., Ch.B., D.P.H. (St. Andrews)

Chief Public Health Inspector and Surveyor:

L.J. PEARSON, M.R.S.H., M.A.P.H.I.

Assistant Public Health Inspector:

A. MORTON, M.A.P.H.I., M.R.S.H.

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PENISTONE RURAL DISTRICT COUNCIL

Annual Report of the Medical Officer of Health

for the year 1968.

To the Chairman and Members of Penistone Rural District Council.

Ladies and Gentlemen,

I have the honour to submit my Annual Report upon the Health Services of the Penistone Rural District for the year ended 31st December,1968.

The Birth Rate for 1968 is 13.4 per 1,000 of the population; the corrected Birth Rate is 12.8. The Death Rate was 12.3 per 1,000 of the population, the corrected rate being 14.3. The Still-birth Rate for 1968 was 10.0 per 1,000 live and still-births; this rate represents one death. There were no infant deaths.

These statistics are not unduly out of line with the figures for England and Wales and the Administrative County.

As in past years, disease of the circulatory system accounts for a very high proportion of the deaths in the area. Of these, almost half are caused by ischaemic heart disease ("coronaries"). As we have all seen from a great deal of television and newspaper publicity of cardiac surgery, much time and resources are being spent in many parts of the world on this problem as a whole; so far, with moderate results.

Once again the incidence of infectious disease has risen. As before, this is due to an increased incidence of measles. At the time of writing, I am once again arranging a measles immunisation campaign. Previous efforts have been unsuccessful due to difficulties over the vaccine supply; this time I have the required vaccine in my offices, so I look forward to better results.

As I write, it is a pity that no progress can be reported over the fluoridation of water supplies. On all the evidence, this is a first-class public health measure, but so far the water authority have made no move in this direction.

That part of the report dealing with the sanitary circumstances has been prepared by Mr. Pearson, The Chief Public Health Inspector.

There are 2,699 houses in the area, 2,540 of which have a public mains water supply. 159 houses are supplied from private sources. If any consumer of a private supply is anxious about its quality, we will advise and help with any necessary testing.

29 samples were taken from the public supply for chemical analysis; all were satisfactory. 394 samples were examined bacteriologically and only two were found to be unsatisfactory. Of the total of houses, 2,586 are connected to either public or private sewer. Of the remainder, 86 have privies, 27 have chemical closets.

Much of the Public Health Inspector's work, as listed, is routine. Nevertheless, it is important work for the continuing health of the community.

In conclusion, I wish to thank the Chairman and members of the Health Committee for their support and assistance during the year. I would also like to thank Mr. Stanley and Mr. Pearson, along with my other colleagues on the Council staff, for their help and co-operation during the year 1968.

I am,

Yours faithfully,

F.C.ARMSTRONG

Medical Officer of Health.

DISTRICT STATISTICS IN BRIEF

1968

The Penistone Rural District covers an area of 29,002 acres. The district is divided into 10 parishes. The approximate acreage and the number of houses in each parish is as follows :-

PARISH	ACREAGE	NUMBER OF HOUSES
Cawthorne	3,709	399
Dunford	8,953	266
Gunthwaite and Ingbirchworth	2,057	113
High Hoyland	851	54
Hunshelf	1,816	94
Langsett	4,914	81
Oxspring	1,201	242
Silkstone	1,559	640
Stainborough	1,720	144
Thurgoland	2,222	518
	29,002	2,551

The Rateable Value of the district is £305,198 while the Product of a Penny Rate is estimated to be £1,178. 0s. 0d. as at 1st April, 1968.

VITAL STATISTICS.

POPULATION.

The Registrar-General has given his estimation of the population at the mid-year as 7,400. This is 20 more than the figure for the previous year.

BIRTHS.

There were 99 live births attributed to the district during 1968; of these 51 were males and 48 females. There were 9 illegitimate births (6 male and 3 female).

STILL-BIRTHS.

During the year there was one still-birth (male).

DEATHS.

91 deaths were attributed to the district, an increase of 20 when compared with the figure for 1967. Set out below are tables of Live Birth Rates, Still-birth Rates and Crude Death Rates, with those rates for other parts of the country.

RATES PER 1,000 TOTAL POPULATION

YEAR	ENGLAND AND WALES	WEST RIDING ADMINISTRATIVE COUNTY	PENISTONE R.D. Crude Rate.	PENISTONE R.D. Corrected Rate.
	LIVE BIRTHS (Rates per 1,000 of the population)			
1968	16.9	17.6	13.4	12.8
1967	17.2	18.0	15.6	15.0
1966	17.7	18.0	15.2	14.6
1965	18.0	18.2	17.1	16.4
1964	18.4	18.5	16.2	15.6
	DEATHS (Crude Death Rate)			
1968	11.9	11.6	12.3	14.3
1967	11.2	11.2	9.6	11.2
1966	11.7	12.1	10.6	12.3
1965	11.5	11.6	11.1	12.6
1964	11.3	11.5	11.0	12.7
	STILL-BIRTHS (Rates per 1,000 Live and Still-births)			
1968	14.3	14.3	10.0	
1967	14,8	15.2	17.1	
1966	15.4	14.4	8.8	
1965	15.7	16.0	23.3	
1964	16.3	17.6	24.4	

PRINCIPAL CAUSES OF DEATH

	Male.	Female.	Total.
MALIGNANT NEOPLASM			
Stomach	2	-	2
Lung and Bronchus	1	1	2
Breast	-	3	3
Other sites, including Leukaemia	4	4	8
OTHER ENDOCRINE ETC. DISEASES	-	1	1
DIABETES	-	-	-
CIRCULATORY SYSTEM.			
Cerebro-vascular Disease	3	4	7
Hypertension with Heart Disease	-	2	2
Ischaemic Heart Disease	12	14	26
Chronic Rheumatic Heart Disease	2	-	2
Other Heart Disease	4	8	12
Other Circulatory Disease	2	1	3
RESPIRATORY SYSTEM			
Influenza	-	-	-
Bronchitis and Emphysema	6	-	6
Pneumonia	5	2	7
Tuberculosis of Respiratory System	1	-	1
Other Diseases of Respiratory System	-	-	-
DIGESTIVE SYSTEM			
Other Diseases of Digestive system	-	1	1
GENITO-URINARY SYSTEM			
Hyperplasia of Prostate	1	-	1
Other Diseases of Genito-Urinary System	-	2	2
ACCIDENTS AND VIOLENCE			
Motor-vehicle accidents	1	1	2
All other accidents	2	-	2
Suicide and self-inflicted injuries.	1	-	1
	47	44	91

AGE DISTRIBUTION OF DEATHS

AGE GROUP	1964	1965	1966	1967	1968
Under 1 year	2	-	3	2	-
1 to 2 years	-	-	-	-	-
2 to 5 years	1	-	-	-	-
5 to 15 years	-	-	-	-	1
15 to 25 years	1	1	2	-	-
25 to 45 years	6	4	-	1	3
45 to 65 years	18	19	20	15	24
65 years and over	53	58	53	53	63
TOTALS	81	82	78	71	91

INFANTILE MORTALITY

There were no infant deaths during 1968.

DEATHS UNDER ONE YEAR

Rate per 1,000 Live Births

YEAR	ENGLAND AND WALES	WEST RIDING ADMINISTRATIVE COUNTY	PENISTONE R.D.
1968	18.3	18.5	0.00
1967	18.3	19.2	17.4
1966	19.0	19.8	26.8
1965	19.0	20.7	0.00
1964	20.0	22.2	16.7

MATERNAL MORTALITY

There were no maternal deaths during 1968.

INQUESTS

The number of inquests held during 1968 was four. In seven cases the cause of death was certified after Post-mortem Examination without inquest.

NATIONAL HEALTH SERVICE ACTS, 1946/57

VITAL STATISTICS
Mothers and Infants.

Live Births	
Number	99
Rate per 1,000 population	13.4
Illegitimate Live Births (per cent of total live births)	9.0
Still-births	
Number	1
Rate per 1,000 total live and still-births	10.0
Total Live and Still-births	100
Infant Deaths (deaths under one year)	-
Infant Mortality Rates	
Total Infant deaths per 1,000 total live births	-
Legitimate infant deaths per 1,000 legitimate live births	-
Illegitimate infant deaths per 1,000 illegitimate live births	-
Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births)	-
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	-
Perinatal Mortality Rate (still-births and deaths under one week combined per 1,000 total live and still-births)	10.0
Maternal Mortality (including abortion)	
Number of deaths	-
Rate per 1,000 total live and still-births	-

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Infectious Diseases other than Tuberculosis.

During the year 87 cases of Infectious Disease were notified. The following tables are self-explanatory.

DISEASE	1964	1965	1966	1967	1968
Scarlet Fever.	3	1	6	10	-
Diphtheria	-	-	-	-	-
Measles	39	84	100	25	85
Whooping Cough	8	1	3	4	1
Pneumonia (notifiable)	1	-	-	-	-
Acute Anterior Poliomyelitis	-	-	-	-	-
Erysipelas	-	1	-	1	-
Dysentery	-	-	-	1	-
Cerebro-Spinal Meningitis	-	-	-	-	-
Food Poisoning	-	3	-	-	-
Malaria	-	-	-	-	-
Acute Meningitis	-	-	-	-	1
Meningococcal Infection	-	-	2	-	-
Puerperal Pyrexia	-	-	-	-	-
Acute Encephalitis (Post-infectious)	-	-	-	-	-
TOTALS:	51	90	111	41	87

ATTACK RATE OF COMMONER INFECTIOUS DISEASES

DISEASE	ENGLAND AND WALES	WEST RIDING ADMINISTRATIVE COUNTY	PENISTONE R.D.
Scarlet Fever	0.31	0.45	0.00
Diphtheria	0.00	0.00	0.00
Measles	4.86	8.62	11.4
Whooping Cough	0.36	0.33	0.13
Acute Poliomyelitis (Paralytic)	0.00	0.00	0.00
(Non-Paralytic)	0.00	0.00	0.00
Dysentery	0.40	0.39	0.00
Typhoid Fever	0.00	0.00	0.00

AGE DISTRIBUTION OF INFECTIOUS DISEASES

DISEASE / AGE GROUP	0 - 1 year	1 - 2 years	2 - 3 years	3 - 4 years	4 - 5 years	5 - 10 years	10 - 15 years	15 - 25 years	25 - 35 years	35 - 45 years	45 - 65 years	65 years and over	Age unknown	TOTALS
Scarlet Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	5	4	5	10	10	45	3	1	1	-	-	-	1	85
Whooping Cough	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Meningococcal Infection	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Encephalitis (Post-infectious)	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Meningitis	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS	5	4	6	10	10	45	3	1	2	-	-	-	1	87

SCARLET FEVER.

There were no cases of Scarlet Fever notified during the year. This is a satisfactory situation, but the numbers fluctuate considerably from year to year when we are dealing with these small totals.

DIPHTHERIA.

There were no cases of Diphtheria notified during 1968. During this year we continued the computer scheme for recording immunisation. As I explained in your last report, this use of the computer is designed to keep a very close check on those children who have not been immunised at the appropriate age, and to continue to issue repeat invitations to the parents to have the procedure carried out. As a result of this we have achieved a much higher rate of immunisation in the divisional area. The figures for 1968 are deceptively reduced, the reduction being caused by the commencement of a new immunisation schedule on 1st April, 1968.

	1968	1967
Primary immunisations	877	1,309
'Booster' doses	1,121	1,075

WHOOPING COUGH.

There was 1 case of Whooping Cough notified in 1968, compared with 4 for 1967. This case occurred in Silkstone during the second quarter, for which we have no record of immunisation.

The vast majority of the children who contact Whooping Cough when they have been immunised suffer the disease to a relatively mild degree; in fact, a great many children probably have the disease to such a mild degree that it is unrecognizable as clinical Whooping Cough. In the divisional area 877 children were immunised during 1968, compared with 1,301 during 1967. This figure is lower than that for last year, the reason being that in April of 1968 we switched over to the new Ministry recommended schedule of immunisation, which delayed primary immunisation to the age of six months. As a result of this delay the figures from April, 1968 to April, 1969 are, therefore, reduced.

MEASLES.

In 1968, 85 cases of Measles were notified, an increase over the number of 25 for 1967. The attack rate for the district was 11.4 which, again, is greater than that for the West Riding Administrative County and also greater than that for England and Wales as a whole. I don't read anything sinister into this situation, as a great deal depends upon which time of the year the outbreak of Measles hits the varying parts of the country and whether, in fact, each outbreak affects the country uniformally. At the time of writing we are about to undertake, for the second time, an immunisation programme against Measles. Early in 1969 an immunisation programme was only just begun, when difficulties over vaccine supply halted it.

POLIOMYELITIS.

There were no cases of Poliomyelitis notified during the year for your district. You will notice from the table on page No. 7. that there were no cases of Poliomyelitis notified for England and Wales or for the West Riding Administrative County. There can be very little doubt that this is due to the vaccination programme. Like all other vaccination programmes, once begun it is imperative that it continue. The computer method of recording immunisation is of assistance in maintaining a high degree of vaccination, because it issues individual invitations to each child known to reside within the area. Below is given a table showing the immunisation figures for the Division as a whole.

VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1968

TABLE 1

Completed Primary Courses - Number of persons under age 16

Year of birth					Others under age 16	Total
1968	1967	1966	1965	1961-64		
315	536	14	7	28	2	902

The reduced number is accounted for by the change-over in the immunisation schedule, as was described in the paragraph relating to Whooping Cough.

TABLE 2

Reinforcing Doses - Number of persons under age 16

Year of birth					Others under age 16	Total
1968	1967	1966	1965	1961-64		
-	239	61	10	769	5	1,084

ACUTE MENINGITIS

One case was notified in the fourth quarter. This disease heading became notifiable after 1st October 1968 under the new regulations.

SMALLPOX

There were no cases of Smallpox notified in the area in 1968. A total of 588 persons within the divisional area received primary vaccination, compared with 583 during 1967. As I have said on previous occasions, primary vaccination carried very slight risk with it; unfortunately, the risk increases with age. It is known that the least possible risk is incurred between the ages of 1 and 2 years, therefore it is immediately clear that the proper time to have the procedure carried out is in the second year of life. Revaccination does not carry the risks associated with primary vaccination.

DISEASES OF THE ALIMENTARY TRACT

There were no cases of Food Poisoning or Dysentery notified during 1968. As I have said on many occasions in the past, both in reports and at Health Committee meetings, the control of these bowel infections is very largely dependent on personal hygiene, not only by the handlers of food in shops, but also on the part of all the public. Even with the greatest care there must occasionally be a transfer of infection from a carrier of a disease to the general public, but if everyone took the appropriate precautions, then this sort of outbreak could be kept to a bare minimum. The answer, therefore, is continuous and perhaps intensified health education.

TUBERCULOSIS

There was 1 new case of Pulmonary Tuberculosis notified in the area during 1968, in the fourth quarter.

The hard work of the hospital staff and our own, in following up contacts of the known disease and examining them for early detection of secondary disease, has continued. The Mass Radiography Service continues, whenever possible, to visit the area, but no member of the public need wait for such an occasion to arise because the Mass Radiography Centre in the city is permanently available.

During the year we were fortunate to have a visit from the Mass Radiography Unit, which attended at the Hepworth Iron Co. Ltd., Hazelhead, and also the Child Welfare Centre, Shrewsbury Road, Penistone.

B.C.G. VACCINATION.

All children in their first year at the Secondary School were offered vaccination against tuberculosis. 244 children were skin tested, to see if immunisation was indicated; 227 of these were vaccinated. 9, who showed a positive skin reaction, did not require vaccination. 8 were absent, and these 8 will be offered vaccination next year. The vaccination procedure itself causes very little trouble and there is, as usual, a high rate of acceptance.

B.C.G. Vaccination is one of a number of preventive measures against tuberculosis infection; the others are improving housing conditions and improving nutrition, plus a better general understanding of the vital factors in maintaining good general health. This, along with the early detection of the disease through the National Health Service, and principally the Mass Radiography Service, is the reason for the present reasonably satisfactory control of tuberculosis.

BRUCELLOSIS.

On two occasions during the year the germ of Brucellosis was discovered in bulk samples of milk. The two instances occurred on two separate farms, and in each case the farmers and ourselves co-operated completely to clear the matter up as quickly as possible, both in the interests of the public and in the interest of the milk supplier.

GENERAL PROVISION OF THE HEALTH SERVICES

HOSPITALS.

The general hospitals for the Penistone area are normally those in Barnsley and Sheffield. For some outlying parts of the district, however, the Huddersfield hospitals are more convenient.

Infectious Diseases cases are accommodated at Lodge Moor, Sheffield. Maternity cases are dealt with at the Chapeltown Maternity Home, St. Helen Hospital, Barnsley, and the Princess Royal Maternity Home, Huddersfield.

CERVICAL CYTOLOGY.

During the year we continued the service of taking cervical smears for the detection of early carcinoma of the cervix. We have continued the policy of seeking those women most at risk, i.e. over 35 years of age with 4 or more children, but have also taken in any other married women who were anxious to have the test carried out. We have not sought to publicise this very widely, but have preferred rather to seek the cases through our own nurses and through the general practitioner service, since the number of smears available is still limited, and this relative shortage of smear facilities in the laboratory is the controlling factor in the numbers we try to encourage to the clinic. The number of positive tests have been very small indeed, but we sincerely hope, as a result of having discovered these positives, that the ladies concerned will enjoy a normal life span.

LABORATORY FACILITIES.

The Public Health Laboratories at Wakefield and Sheffield are available to provide all the necessary investigations we may require in the epidemiological field. The respective Medical Directors are most willing to help and advise, and I am grateful to them.

MORTUARY.

There is a Mortuary in Penistone, and this serves the surrounding area.

AMBULANCE SERVICE

The West Riding County Council provide ambulance facilities in accordance with the requirements of Section 27 of the National Health Service Act, 1946.

During the year no difficulty was experienced regarding staffing, and the full complement of staff of 39, plus one Station Officer, worked a three-shift system from the main operational depot at Hoyland, with an alternating shift at the new Penistone Depot, which was officially opened during 1966. There are six vehicles at Hoyland and one ambulance car, and three at Penistone.

Liaison with all hospitals continues at a high level, and the Authority continues to work most amicably with neighbouring County Boroughs.

Ambulance calls from doctors, hospitals, institutions and members of the public, in emergencies, are received at the Station Control Room, and are competently dealt with by the efficient use of a radio communication system, ensuring speed and economical use of the vehicles, and at the same time reducing mileage to the minimum.

The majority of the ambulance personnel are competent to render first aid, and staff are encouraged to train and obtain current certificates, the County Council giving monetary recognition by way of extra pay as an incentive to qualification.

CLINICS.

Below are the tables showing the various Clinics held within the Penistone District and, in certain cases, figures indicating the number of attendances during 1968.

CHILD WELFARE CENTRES

Name and Address of Centre. Name of Doctor and Nurse in attendance.	Day and Time of Sessions.	Total number of attendances during the year.	
		Number who attended for first time during 1968.	Children up to 5 years.
PENISTONE Shrewsbury Road. Dr. J.M.Clarke Mrs. B. Bailey Mrs. H. Dransfield.	Monday p.m.	415	2,083
CAWTHORNE Golf House. Dr. J.M.Clarke Mrs. D. Gibson.	Alternate Wednesdays p.m.	74	296
MOBILE CLINIC -MILLHOUSE GREEN Dr. M.R.McGinty Mrs. H. Dransfield	Alternate Thursdays a.m.	64	278
MOBILE CLINIC -THURGOLAND Dr. M.R.McGinty Mrs. B. Bailey	Alternate Thursdays p.m.	68	314

Other Clinics held at Shrewsbury Road include:-

Ophthalmological; Ante-natal Relaxation Classes; Chiropody; Speech Therapy.

An Ante-natal Clinic is held at Shrewsbury Road Clinic every Tuesday. The general practitioners in Penistone attend alternate weeks, with the exception of the fifth Tuesday. The Midwives attend the clinics each week, and occasionally the Health Visitor is also present.

TUBERCULOSIS

Those people suffering from Tuberculosis are referred to the Chest Clinic at 46, Church Street, Barnsley. At this clinic complete investigation is possible, including X-ray. The Tuberculosis Health Visitor also attends and is present when the patient is seen by the Consultant. She is able to maintain a liaison between the Consultant and the domestic environment, which is a most valuable contribution to the patient's general welfare, since her main job is the follow-up of contacts to try to restrict the spread of this disease. Her presence at the Chest Clinic is invaluable, since she gets very early information, in detail, of who the contacts were and where they are to be found.

HEALTH VISITING SERVICE.

The Health Visitor has a multitude of duties which are much too numerous to detail here; suffice it to say that she plays a large part in tying up the loose ends in our National Health Service, and also is very actively engaged in dealing with the other social services for the overall benefit of those in need. It is by no means an easy job to undertake. There are changes in the social services and in the Health Service being discussed at the moment, and my own impression is that the changes in the health visitors' duties will be ultimately to the benefit of both the health visitors and the community.

The health visitors made a total of 3,222 visits. There were, in addition to these, a number of visits made by health visitors outside this Division, this being caused by the attachment of staff.

The Health Visiting Staff as at 31st December, 1968:-

Name.	Address.	Telephone No.
Mrs. H. Dransfield.	"Casamia", Moorend Lane, Silkstone Common, Barnsley.	Silkstone 302.
Mrs. D. Gibson.	Blacker House, 133, Blacker Road, Mapplewell, Barnsley.	Darton 2100.

HOME NURSING SERVICE.

During the year staff remained stable, and attachment to general practitioner units took place. Relief duties were provided by Mrs. Wilsden and Mrs. Harding. The home nurse undertakes nursing care within the domiciliary field, in addition to the giving of injections, and pre-operative preparation of patients requiring hospital treatment. She is actively engaged in the rehabilitation of the handicapped and geriatric patients. Nursing aids, incontinent sheets and pads and equipment are made available under the County loan scheme. During the year the number of cases visited was 217 and the total visits paid was 7,867. Both areas (Rural and Urban) are included in these figures.

The staff as at 31st December, 1968:-

Name.	Address.	Telephone No.
Mrs. M.E.Henderson.	6, Grenc' View, Hood Green, Stainborough.	Silkstone 293.
Mrs. J.M.Snell.	3, Windmill Lane, Thurlstone.	Penistone 2451.

MIDWIFERY SERVICE.

During the year the midwifery staff remained the same. The Midwives attend ante-natal classes in the general practitioners' surgery and the Local Health Authority Clinic; this means that there is a close working relationship with the practitioners within the area. In addition, they attend ante-natal and

relaxation classes, when filmstrips, sound films and visual aids are used to prepare the expectant mother for her forthcoming confinement. The Health Visitor attends certain of the classes, to discuss prophylactic measures available for the newly-born against certain diseases.

During 1968 the Midwives attended 30 cases as Midwives and 33 as Maternity Nurses. In 37 cases Pethidine was administered and in 8 cases Trilene Analgesia was used.

The Midwives available as at 31st December, 1968:-

Name.	Address.	Telephone No.
Mrs. D.S.Bowe.	"Plevna", Silkstone Common.	Silkstone 552
Miss K. Sykes.	34, Victoria Street, Penistone.	Penistone 2267.

DOMESTIC HELP SERVICE.

There were 10,826 Domestic Help hours provided in the district during 1968, compared with 9,466 in 1967. In all, 19 Domestic Helps were employed in 64 homes. There were 42 cases continuing from 1967, and the following table explains the type of cases involved:-

General cases, 65 years and over ...	54
General cases under 65 years	3
Tuberculosis cases	-
Maternity cases	1
Others	6
	64

I think that any home which has experienced the need for a Home Help, and had the need met, will readily appreciate how valuable a service this is. If it is the intention, as appears to be the case, that patients will be kept where the vast majority of them would prefer to be, i.e. in their own homes, then there is no doubt that this service must expand considerably.

CHIROPODY SERVICE.

During 1968, 137 patients received 662 treatments at the clinic; 114 patients received 340 treatments in their own homes. This compares with 134 patients who received clinic treatment and 112 patients who received treatment at home in 1967.

Taken alongside all the other supporting services for the handicapped and the elderly, this service is another valuable addition. In the past it was not uncommon for an elderly person to become bedfast for no other reason than that their feet were painful. With someone of really advanced years it only requires a week or two in bed for the situation to become permanent.

HEALTH EDUCATION.

CLINICS.

No matter what activity is taking place in any clinic, health education forms sometimes a small part and often a large part of the general conduct. Posters and other literature are, of course, used. Group discussions, including care of the hair, teeth, skin, feet and diet, personal hygiene and home safety, are held. In addition to this all staff (medical, Public Health Inspectors and Nurses) are actively engaged in health education on every visit they make, because in the vast majority of instances an explanation is given for every instruction issued. In talking of health education, one must not forget the mass media, i.e. the television and newspaper source; although the quality of the material can sometimes be called in question, nevertheless I am sure we have all noticed the amount of educational material which is broadcast.

MOTHERCRAFT AND RELAXATION CLASSES

These classes are held in the Child Welfare Centre at Shrewsbury Road. The relaxation exercises are generally held to be beneficial; in addition to this it allows a number of expectant mothers to meet and discuss with each other their various trials and tribulations. There is no doubt that this is an example of a worry shared being a worry halved. The health visitor also talks to the mothers during these meetings about the general care of their babies and the value of immunisation.

CHILD WELFARE CLINICS

These are held weekly (Monday) at Shrewsbury Road, and each alternate Wednesday at the Golf House, Cawthorne. These days we are asking the health visitor to take a more and more important role in the baby clinic, e.g. most of the immunisation is now done by the health visitor, and with the current shortage of medical staff this has been an enormous help. The Medical Officer now sees those children who are referred by the health visitor.

The Mobile Child Welfare Clinic visits Millhouse Green and Thurgoland each alternate Thursday, where the services afforded to the public are the same as those at the static clinics. As always, those ladies who come voluntarily to help at the Child Welfare Clinics provide a most valuable service, and we all appreciate their efforts very much.

EYE CLINIC

Sessions for patients residing in the Penistone district (both Urban and Rural areas) are held in the Shrewsbury Road Clinic one half-day or full day, on Tuesday, as the need arises. The list of children requiring examination is supplied to the Consultant Ophthalmologist, who attends personally to see those children. All but a very few are referred to him by School Medical Officers. During 1968 there were 157 attendances, of which 49 were new cases. Spectacles were provided in 60 instances.

MENTAL HEALTH SERVICE

The Mental Hospitals are more and more adapted to care for patients on a short term basis, and the means to discharge patients and keep them at home is one of the main aims of a comprehensive community service. All this indicates the necessity for combined planning and improved communication between the various agencies, so that patients have a continuity of treatment of the right kind. Cultural attitudes in the country have undergone a certain change towards the psychiatric patient, but there is still a reluctance on the part of the patient towards admission to hospital.

Psychiatric Out-patient Clinics have been opened in many large general hospitals, often staffed by Consultants from the local Mental Hospitals, resulting in a better and more understanding relationship between general and mental hospitals. The patient is the concern of the general practitioner, psychiatrist and mental welfare officer, and all three must work together. This will be a reality in Ecclesfield when family doctor, psychiatrist, mental welfare officers and other agencies can meet under the same roof and be able to discuss the patient's needs easily and immediately at the new Health Centre.

There was a 100% increase in patients attending the Out-patient Clinic held at Mortomley Hall in 1968. This does not mean that mental illness is on the increase, but that more and more people are concerned about their mental health and seek advice and help for their many problems. It is encouraging to see relatives and friends accompanying the patients to the clinic; they not only show a concern for the patient, but are able to see and feel the atmosphere of a psychiatric clinic away from the hospital surroundings. A total of 236 patients attended the 48 clinic sessions during the year.

There were no serious problems or delays in obtaining beds for patients who required treatment.

A number of students visited the Division during the year and observed the work of the mental welfare officer.

ADMISSIONS AND DISCHARGES TO MENTAL HOSPITALS

There were 4 patients (1 male and 3 female) admitted to Middlewood Hospital during the year, and 3 patients were discharged (1 male and 2 female). After-care was requested in 2 cases.

MENTAL SUBNORMALITY

The Friday morning out-patient clinics for subnormal patients continued during the year. A total of 36 juveniles were seen over the 27 sessions. This clinic gives opportunity for parents of severely handicapped children to discuss their many problems with the Consultant Psychiatrist.

No problems were experienced in placing subnormal children in short-stay care hospital beds. This service is a great help to parents and fully appreciated by myself and mental welfare officers.

The Parent/Teachers' Association gave valuable help in organising a successful year of social activities.

SPECIAL CARE UNIT

During the year this unit was taking in its maximum number of handicapped children, and apart from holidays, sickness and other domestic problems, 11 children attended 5 days a week.

The following are statistics of the mentally subnormal cases in the area.

Care and Guidance

	Male.	Female.
Over 16 years		
In full employment	5	1
Fully employed and/or supervised at home ...	4	4
Training Centre	1	3
Training Centre refused	-	-
Under 16 years		
Training Centre	1	2
Cot cases in Care Unit	-	-
	11	10

DISTRIBUTION OF WELFARE FOODS.

The amount of Welfare Foods issued in Penistone Rural District during 1968 was as follows:-

National Dried Milk	195 tins
Cod Liver Oil	27 bottles
Vitamin A and D Tablets ...	9 (packets of 45)
Orange Juice	461 bottles

These foods are issued at the following Centres throughout the Division on the days and times stated:-

Address of Premises	Days.	Times.
STOCKSBRIDGE URBAN DISTRICT		
Child Welfare Centre, Johnson Street, Stocksbridge.	Thursday	2.00 - 4.00 p.m.
Brightside & Carbrook Co-op Society, Deepcar Branch, Manchester Road, Deepcar.	During Shop Hours.	
PENISTONE URBAN DISTRICT		
Child Welfare Centre, Shrewsbury Road, Penistone.	Monday	2.00 - 4.00 p.m.
PENISTONE RURAL DISTRICT		
Child Welfare Centre, Golf Club, Cawthorne.	Alternate Wednesdays	1.30 - 3.30 p.m.
P & C. Sinclair, The Stores, Halifax Road, Thurgoland.	During Shop Hours.	
HOYLAND NETHER URBAN DISTRICT		
Child Welfare Centre. Rockingham Youth Club, Sheffield Rd., Hoyland Common.	Thursday.	2.00 - 4.00 p.m.
Child Welfare Centre, Leisure Centre, King Street, Hoyland.	Tuesday	11.00 - 12.00 a.m. 2.00 - 4.00 p.m.
WORTLEY RURAL DISTRICT		
Clinic, Zion Congregational Church, Langsett Road South, Oughtibridge.	Thursday	2.00 - 4.00 p.m.
Clinic, Memorial Hall, Worrall.	Alternate Tuesdays	2.00 - 4.00 p.m.
Child Welfare Centre, Greenhead Wesleyan Reform Chapel, Greenhead Lane, Chapeltown.	Wednesday	11.00 - 12.00 a.m. 2.00 - 4.00 p.m.
Clinic, Methodist Chapel, High Green.	Tuesday	2.00 - 4.00 p.m.
Colley Estate Clinic, Wheata Place, Sheffield, 5.	Monday	2.00 - 4.00 p.m.
Clinic, Community Hall, Main Street, Grenoside.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, Wharncliffe Silkstone Welfare Hall, Pilley, Nr. Barnsley.	Alternate Mondays.	2.00 - 4.00 p.m.

WORTLEY RURAL DISTRICT (Cont'd.)

Address of Premises	Days	Times
Child Welfare Centre, Knowle Top, Stannington.	Wednesday	2.00 - 4.00 p.m.
Child Welfare Centre, Congregational Church, Loxley.	Alternate Tuesdays	1.30 - 3.30 p.m.
Mrs. D. Harper, The Shop, Main Road, Dungworth.	During Shop Hours.	

SANITARY CIRCUMSTANCES

Prepared by L.J.Pearson.

WATER SUPPLIES

Houses and water supplies

2,699 houses are situated in the area, 2,540 of which have a supply from public mains. 159 houses are supplied from private sources of supply. There are one or two instances of shared supplies in this total.

Sources of supply

Barnsley Corporation Waterworks Department, Mid-Calder Water Board and Sheffield Corporation Waterworks Department are responsible for the supplying and distribution of all public supplies in the Penistone Rural District Area.

Quality of Water

Number of samples examined:-

	Chemical		Plumbo-Solvency		Bacteriological	
	Sat.	Unsat.	Sat.	Unsat.	Sat.	Unsat.
Principal Supply	29	nil	29	nil	392	2
Minor Supply	--	--	--	--	--	--
TOTAL:	29	nil	29	nil	392	2

SEWERAGE AND SEWAGE DISPOSAL

Sewerage

Of the 2,699 houses and premises situated in the Council's district, 2,586 are connected to either public or private sewer.

The disposal of sewage from the remaining properties is by means of private cesspools and septic tank installations.

Silkstone Common

The preparation of the scheme for pumping sewage from Silkstone Common to the new Silkstone Works is still in the hands of the Consulting Engineers.

Thurgoland

The preparation of the sewage disposal scheme for the Southern part of Thurgoland is in abeyance pending the result of a Ministry Enquiry of the Penistone Urban District Council proposed works at Oxspring.

Cawthorne

With the rapid development of new properties being built in the area, the existing Sewage Disposal Works is nearing capacity. Consultations have been taking place with the representatives of the Yorkshire Ouse River's Board regarding certain modifications now considered necessary at the works.

Sewage Disposal

The existing arrangements for dealing with the sewage disposal are scheduled below:-

Parish	Plant	Remarks
Cawthorne	Works modernised in 1959.	This plant deals with the sewage from the west side of the village and is situated at Dark Lane.
	Ejector Station situated in Cinder Hill Lane - erected in 1959.	This plant deals with the sewage from the east side of the village.

Parish	Plant	Remarks
Dunford (Dunford Bridge)	Screening chamber, detritus tank, 2 distributors and humus tanks	Situated east of the Railway Goods yard.
Crowedge	Modern plant constructed December, 1967.	
Gunthwaite & Ingbirchworth.	Modern plant constructed 1956.	New sewers laid in 1956 allowing for dealing with 98% of the village.
High Hoyland	Settling Tank	Serving only the Council houses and situated in Margery Wood.
Hunshelf	Screen chamber, detritus tank and tippler distribution.	Dealing with the built-up area of Green Moor and situated north of the centre of Well Hill
Oxspring	Detritus tanks, settling tank, dosing chamber, 1 distributor humus tank	Dealing with the built-up area in the Parish and situated near Bower Hill Bridge.
Silkstone	New works constructed 1967.	
Silkstone Common	Screen chamber, detritus tank, 2 distributors and humus tanks.	Dealing with the Silkstone Common area and situated north of Throstle Nest Farm, Moorend.
Stainborough	Modern plant constructed in 1956. These works have been extended by the addition of new distributor, settling humus and sludge tanks.	Dealing with Hood Green village and situated at the rear of the Airey houses.
Thurgoland	Settling tanks, 2 filter beds. (A complete new scheme is being prepared to replace this scheme)	Dealing with Thurgoland village and situated at Spring Wood.
Crane Moor	New modern plant completed during 1957	New sewers were laid connecting the sewers on the northern area of Thurgoland with the new Crane Moor Works situated at Dance Lane, Crane Moor.

CONVERSION OF PRIVIES

The following tables show the number of conversions made during the year, all of which received financial assistance from the Council:-

Parish	Privy Conversion Grants	Improvement Grants
Cawthorne	---	2
Dunford	---	5
Gunthwaite and Ingbirchworth	---	---
High Hoyland	---	3
Hunshelf	---	2
Langsett	---	---
Oxspring	---	5
Silkstone	---	---
Stainborough	---	---
Thurgoland	---	---
		17

SUMMARY OF THE NUMBER OF WATER CLOSETS, PRIVIES AND PAN CLOSETS

Parish	No. of houses	No. of houses with W.C.'s	No. of houses with privies	No. of houses with chemical closets
Cawthorne	420	414	4	2
Dunford	277	218	51	8
Gunthwaite and Ingbirchworth	128	126	1	1
High Hoyland	54	53	1	-
Hunshelf	95	92	1	2
Langsett	82	71	2	9
Oxspring	255	247	7	1
Silkstone	670	659	7	4
Stainborough	169	164	5	-
Thurgoland	549	542	7	-
	2,699	2,586	86	27

Total number of Pedestal Water Closets = 2,586 (estimated)
Total number of Privies = 86 (estimated)
Total number of Chemical Closets = 27 (estimated)

Approximately 89% of the total number of houses are connected to a water carriage system.

REFUSE COLLECTION AND DISPOSAL

The whole of the district is publicly scavenged. All men are supplied with overalls, wellington boots, gloves, goggles and rainproof outfits. Two refuse vehicles are fully employed on this service:-

Make	Capacity	Year of Manufacture
Karrier	Diesel 12 cubic yards	1962
Shelvoke & Drewry	Diesel 14 cubic yards	1963

Two men and six loaders are employed on these vehicles.

Frequency of Collection

Bins in the most populated areas are empties every 7 - 10 days. Bins in the sparsely populated areas are emptied fortnightly. Privies in all parts of the district every 4 - 5 weeks, or more frequently upon complaint.

Difficulties are experienced at various times owing to sickness of the Council's employees and at holiday periods when the teams are depleted in numbers. The Council have, under consideration, a Bonus Incentive Scheme for the refuse collectors.

Refuse Tips.

There are five refuse tips situated in the area; the refuse is entirely disposed of by uncontrolled tipping. The main tip situated at Cone Lane, Silkstone, is rapidly becoming full and a new tip will be required in the near future.

PUBLIC HEALTH ACT, 1936

Sanitary Inspections - Nuisances

Total number of inspections made in 1968 for nuisances - 150
Total number of inspections made in 1968 for other purposes - 600

Nuisances found in 1968 - 38
Nuisances abated in 1968 - 36
Nuisances outstanding in 1968 - 2

No Statutory action was required during the year.

HOUSING - LOCAL AUTHORITY AND PRIVATE ENTERPRISE

Summary of the number of dwellinghouses situated in the district in 1968.

Parish	New Houses built 1968 L.A.	New Houses built 1968 Private.	No. of Houses demolished 1968	Total No. of houses 1968	Total No. of Council Houses	Estimated Population
Cawthorne	18	16	--	420	85	1,196
Dunford	--	--	--	277	34	814
Gunthwaite & Ingbirchworth	--	3	--	128	28	366
High Hoyland	--	--	--	54	10	154
Hunshelf	--	--	--	95	6	271
Langsett	--	2	--	82	--	243
Oxspring	--	2	--	255	63	728
Silkstone	8	45	3	670	240	1,979
Stainborough	--	--	--	169	50	467
Thurgoland	--	3	20	549	165	1,372
	26	71	23	2,699	681	7,590

HOUSING (FINANCIAL PROVISIONS) ACT, 1958, AS AMENDED BY THE HOUSE PURCHASE AND HOUSING ACT, 1959
DISCRETIONARY AND STANDARD GRANTS

IMPROVEMENT GRANTS, 1968

	Completed to 31.12.67.		Number approved during 1968		Number completed during 1968		Number outstanding 31.12.68.	
	S.	D.	S.	D.	S.	D.	S.	D.
Cawthorne	2	39	3	3	-	2	3	3
Dunford	7	18	7	-	6	-	5	-
Gunthwaite & Ingbirchworth	4	15	2	1	1	1	-	1
High Hoyland	3	6	1	3	1	3	-	1
Hunshelf	1	6	3	-	3	-	-	-
Langsett	-	3	-	-	-	-	-	-
Oxspring	5	11	10	-	6	1	3	4
Silkstone	26	21	6	-	5	1	3	-
Stainborough	6	4	1	-	-	-	1	-
Thurgoland	17	9	3	1	4	1	-	1
	71	132	36	8	26	9	15	10

IMPROVEMENT GRANTS COMPLETED

Year	Discretionary Grants	Standard Grants
1955 - 1960	86	8
1961	4	3
1962	6	5
1963	10	6
1964	15	17
1965	12	13
1966	12	17
1967	7	12
1968	9	26

Completed up to 31.12.68.

171 Discretionary Grants amounting to	£48,262	10s.	3d.
101 Standard Grants amounting to	£12,187	7s.	5d.
	£60,499	17s.	8d.

HOUSING ACTS 1936 1959

During the year a survey of properties has been proceeding. Action has been taken on all properties which have been represented during the year, and six properties were subject to either Closing or Demolition Orders.

HOUSING (FINANCIAL PROVISIONS) ACT, 1958 (AS AMENDED)

Advances were made to 7 applicants totalling £4,660. 0s. 0d. under the above-mentioned Act during the year ending December, 1968.

FOOD INSPECTION AND SUPERVISION

Number of Food Premises

List of food shops and food premises in the district:-

	Number
General Dealers	35
Post Offices	10 (8 are also General Dealers)
Butchers	6
Bakehouses	2 (1 is also a General Dealer)
Fish and Chip Shops	2
Cafes and Road Transport Cafes	9 (6 are also Licensed Premises)
Licensed Premises	24
Slaughterhouses	1
Ice-cream shops	2

21 of the General Dealers sell Ice-cream.

Milk and Dairies Regulations, 1949 - 1954

There are no dairies situated within the district, other than dairy farms which come under the jurisdiction of the Ministry of Agriculture, Fisheries and Food.

Food Hygiene (General) Regulations, 1960

Fifty inspections were carried out at Food Premises other than Slaughterhouses during the year. The majority of these businesses are of a family type, and are generally satisfactory.

Ice-cream Manufacturers

There are no ice-cream manufacturers situated within the district to which the Ice-cream (Heat Treatment) Regulations, 1947 - 1952 would apply.

There are 21 retailers of pre-wrapped ice-cream situated within the area; all premises are periodically inspected.

Meat Inspection

Only one slaughterhouse is now licensed, and these premises were modernised and brought up to the required Ministry standard. A 100% inspection of meat is carried out at these premises.

A summary of the inspected details in accordance with the Ministry's recommendations is as follows:-

Carcases and Offal inspected and condemned in whole or in part, 1968

	Cattle Excluding Cows	Cows	Calves	Sheep and lambs
Number killed (if known)	202	141	-	15
Number inspected	202	141	-	15
All diseases except Tuberculosis and Cysticerci :-				
Whole carcases condemned	1	-	-	1
Carcases of which some part or organ was condemned	20	63	-	2
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	9.90%	44.7%	-	13.3%
Tuberculosis only:-				
Whole carcases condemned	-	-	-	-
Carcases of which some part or organ was condemned	-	-	-	-
Percentage of the number inspected affected with tuberculosis	-	-	-	-
Cysticercosis:-				
Carcases of which some part or organ was condemned	-	-	-	-
Carcases submitted to treatment by refrigeration	-	-	-	-
Generalised and totally condemned	-	-	-	-

CAUSE OF CONDEMNATION AND WEIGHT OF MEAT CONDEMNED

Disease or Condition	Cows lbs.	Cattle excluding cows lbs.	Sheep lbs.	Calves lbs.
Abscessed	75	44	-	-
Actinobacillosis	20	-	-	-
Cirrhosis	114	-	-	-
Distomatosis	240	84	-	-
Hydronephrosis (Nephritis)	8	-	-	-
Pericarditis	16	5	-	-
Pleurisy	36	10	-	-
Pneumonia/septic pneumonia	24	-	162	-
Telangiectasis	364	56	-	-
Xanthosis	10	-	-	-
	907	199	162	

CONDEMNED MEAT

All condemned meat is coloured with special dye, and is collected by an Authorised Dealer.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Specialist contractors, in addition to our own workmen, are engaged on most of the Council refuse tips, sewers and sewage disposal works, and regular treatments are carried out and generally this method is satisfactory.

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

Parish	No. of Caravans	No. of Sites
Cawthorne	10	1
Langsett	6	6
Silkstone	2	1
Stainborough	1	1

One site situated at Cawthorne was found suitable for a licence under the above-mentioned Act. Temporary licences have been issued in respect of the above-mentioned sites, the majority of these caravans are occupied by weekend residents only.

BUILDING REGULATIONS & TOWN AND COUNTRY PLANNING APPLICATIONS

During the year the following applications were received and approved:-

	Building Regulations	Town and Country Planning
Houses and bungalows	72	150
Garages	41	7
Additions or Alterations to houses	36	6
Application from Y.E.B. for overhead cables	-	2
Miscellaneous	13	13
Outline developments	-	4
Industrial and Commercial	16	8
Advertisements	-	4
Agricultural	4	1
Bathrooms	21	-
	203	195

During the year 1965, the Building Regulations came into force, and this complicated piece of legislation caused considerable concern in the initial stages. The Regulations are now accepted by all builders and contractors and the administration of them is now running smoothly.

COUNCIL PROPERTY

The Council are the owners of 681 houses, both pre-war and post-war construction. Most of the repairs to this property are carried out by direct labour, at times it is inevitable because of small staff, that delays occur. Generally the situation is satisfactory.

FACTORIES AND WORKSHOPS FACTORY ACTS, 1937 - 1961

There are 28 factories registered in the area 16 inspections being made during the year. No contraventions of the Act were found.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1968 FOR THE RURAL DISTRICT OF PENISTONE IN THE COUNTY OF YORKS.

Prescribed Particulars on the Administration of the Factories Acts 1937-61

PART I OF THE ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number of Register (2)	Number of: Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	-	-	-	-
(ii) Factories not included in (i) in which Sec. 7 is enforced by the Local Authority	28	16	-	-
(iii) Other Premises in which Sec. 7 is enforced by the Local Authority (excluding outworkers' premises	-	-	-	-
Total	28	16	-	-

2. Cases in which DEFECTS were found

Particulars (1)	Number of cases in which defects were found. Found (2)	Remedied (3)	Referred: To H.M. Inspector (4)	By H.M. Inspector (5)	Number of cases in which prosecutions were instituted. (6)
Want of cleanliness (S1)	-	-	-	-	-
Overcrowding (S2)	-	-	-	-	-
Unreasonable temp. (S3)	-	-	-	-	-
Inadequate ventilation (S4)	-	-	-	-	-
Ineffective drainage of floors (S6)	-	-	-	-	-
Sanitary conveniences (S7)	-	-	-	-	-
(a) Insufficient ..	-	-	-	-	-
(b) Unsuitable or defective	-	-	-	1	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork	-	-	-	-	-
Total	-	-	-	1	-

PART VII. OF THE ACT

Outwork

Sections 110 and 111

Nature of Work	Section 110			Section 111		
	No. of outworkers in August list required by Section 110(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing Apparel) Making etc. washing and cleaning	5	-	-	-	-	-
Household linen	-	-	-	-	-	-
Lace, Lace curtains and net	-	-	-	-	-	-
Curtains and furniture hangings	-	-	-	-	-	-
Furniture and upholstery	-	-	-	-	-	-
Electro-plate	-	-	-	-	-	-
File making	-	-	-	-	-	-
Brass and brass articles	-	-	-	-	-	-
Fur pulling	-	-	-	-	-	-
Iron and steel cable and chains	-	-	-	-	-	-
Iron and steel anchors and grapnels	-	-	-	-	-	-
Cart gear	-	-	-	-	-	-
Locks, latches and keys	-	-	-	-	-	-
Umbrellas etc.	-	-	-	-	-	-
Artificial flowers	-	-	-	-	-	-
Nets, other than wire nets	-	-	-	-	-	-
Tents	-	-	-	-	-	-
Sacks	-	-	-	-	-	-
Racquets and tennis balls	-	-	-	-	-	-
Paper bags	-	-	-	-	-	-
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	-	-	-	-	-	-
Brush making	-	-	-	-	-	-
Pea picking	-	-	-	-	-	-

PART VIII OF THE ACT

Outwork

Sections 110 and 111

Nature of work	Section 110			Section 111		
	No. of outworkers in August list required by Section 110(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Feather sorting	-	-	-	-	-	-
Carding etc. of buttons etc.	-	-	-	-	-	-
Stuffed toys	-	-	-	-	-	-
Basket making	-	-	-	-	-	-
Chocolates and Sweetmeats	-	-	-	-	-	-
Cosaques, Christmas Stockings etc.	-	-	-	-	-	-
Textile weaving	-	-	-	-	-	-
Lampshades	-	-	-	-	-	-
Total ...	5	-	-	-	-	-